



The Board of Water and Sewer Commissioners of the City of Mobile

Vendor Name: _____

Vendor TIN: _____

ACH Authorization Agreement

I, _____, hereby authorize The Board of Water and Sewer Commissioners of the City of Mobile to initiate automatic deposits to my account at the financial institution named below. I also authorize The Board of Water and Sewer Commissioners of the City of Mobile to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold The Board of Water and Sewer Commissioners of the City of Mobile responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until The Board of Water and Sewer Commissioners of the City of Mobile receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Accounts Payable Department.

Account Information

Name of Financial Institution: _____

Routing Number: _____

Account Number: _____ Checking | Savings

Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

Please attach a voided check or deposit slip and return this form to the Accounts Payable Department.

Please note: This form is only required if your preferred method of payment is by ACH.